

## STATEMENT OF INTERESTS

INSTRUCTIONS: This form must be used to report all interests required to be disclosed under the Conflict of Interest Disclosure Act (Tennessee Code Annotated §8—50—501, et seq.) Disclosure statements must be filed annually by January 15 by officeholders, no later than thirty (30) days following the qualifying deadline for candidates and within thirty (30) days from the date of appointment for appointees. Amended disclosures must be filed whenever reported conditions change because of the termination or acquisition of interests for which disclosure is required.

Individuals holding or seeking state offices specified in T.C.A. §8—50—501 must file their disclosure statements with the Registry of Election Finance, 404 James Robertson Parkway, Suite 1614, Nashville, TN 37243-1360. Individuals holding or seeking elected city or county office must file their reports with the county election commission.

Officeholders may complete items 1.-4, and skip to item 15. If there has been no change in condition since the previous report. The disclosure statement must be signed and notarized in item 16. Attach additional pages as necessary. Please type or print all information in black link.

1. DATE OF DISCLOSURE	2. NAME OF OFFICIAL OR CANDIDATE
3/16/00	W. B. Weeks
3. ADDRESS AND PHONE	Street or Rural Route City State Zip Code Phone
305 North Forrest I	Road, Lookout Mountain, TN 37350 (423)821-9853
4. TITLE OF OFFICE HELD OR S	OUGHT (Include district number, if applicable)
Lookout Mountain Tox	n Judge
5. SOURCES OF INCOME: In ger	eral terms list major source or sources of your private income and that of your spouse or minor irm or organization nor dollar amount need be stated.
My law practice.	
Spouse: Her employn	ment at Signal Design Group, Inc.
organization in excess of five the industry. No firm or organization All of our investm	ment by you, your spouse or minor children residing with you in any corporation or other business busand dollars (\$5,000) or five percent (596) of the total capital. It shall be sufficient to identify the in need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.  The need be named nor dollar amounts or percentages stated.
minor children residing with you amounts stated.  My wife is a salar	MPLOYMENT: List offices, directorships and salaried employments held by you, your spouse or it shall be sufficient to identify the industry. No firm or organization need be named nor dollar ied employee of Signal Design Group, Inc., as well as the t. I am the corporate treasurer of that company.
children residing with you. Also,	n or organization for whom compensated lobbying is done by any associate, your spouse or minor list any firm in which you, your spouse or minor children residing with you hold any interest for done. Explain the terms of any such employment and the measures to be supported or opposed.  None
PROFESSIONAL SERVICES: L such as those of an attorney, a	ist in general terms (by areas of the client's interests) the entities to which professional services, coountant or architect, are furnished by you or your spouse.  None

0. LEGISLATIVE EXPENSES (For members of General Assembly		
from private sources for use in defraying the expenses necessar	ily related to the adequate performance of your legislative duties.	
NONE		
1. RETAINER FEES: List any retainer fee you receive from any pe		
opposing, influencing or attempting to influence directly or Indirect General Assembly, the legislative committees or the members	ctly, the passage or defeat of any legislation before the Tennessee	
	thereof.	
NONE		
2. BANKRUPTCY: List any adjudication of bankruptcy or discharge	e received in any United States district court within five (5) years	
of the date of this report.		
NONE		
3. LOANS: List any loan or combination of loans of more than one the	ouegnd dollars (\$1,000) from the same source made in the provious	
	with you. Loans need not be disclosed on this report if they are:	
(1) From your immediate family (spouse, parent, sibling, or c	hild);	
	ordance with existing law in the ordinary course of doing business	
by a written instrument and subject to a due date or amortizati	of interest, be made on a basis which assures repayment, evidenced ion schedule.	
	ng the usual and customary interest rate of the lender and made	
on a basis which assures repayment, evidenced by a written in	estrument and subject to a due date and amortization schedule.	
(4) From a partnership in which you have at least ten percen		
(5) From a corporation in which more than lifty percent (50% immediate family (spouse, parent, sibling, or child).	o) of the outstanding voting shares are owned by you or by your	
NONE		
4. ADDITIONAL INFORMATION: List any additional information y	ou wish to disclose.	
5. OPTION AVAILABLE TO OFFICEHOLDERS ONLY (Check if a	pplicable):	
There has been rio change in conditions since my previous	report	
Prinere has been no change in conditions since my previous	report.	
5. TO BE SIGNED BY REPORTING OFFICIAL OR CANDIDATE (I	must be notarized)	
I do solemnly swear that the information contained in this	Notary Seal	
disclosure statement is true and that it is a complete and	10000.000	
accurate report of all matters that I am required to disclose		
by the Conflict of Interest Disclosure ACL		
10/1/1/1000	SWORN TO AND SUBSCRIBED BEFORE ME IN THE	
signature of official or candidate	Marin 7 for	
	COUNTY OF COULT DE COUNTY OF COUNTY	
	AND THE STATE OF SOMMEDICC	
	and the state of	
	THIS DAY 2011 DAY OF Murch 10 00	
	Sarah (A Alm A)	
	notary public	
	2/10/12	
	date commission expires	
	data commission extras	